## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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7590

05/26/2011

Kenneth J. LuKacher, Esq. South Winton Court Suite 204 3136 Winton Road South Rochester, NY 14623 Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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Tammy	S. N	Moynihan	(Depositor's name
Taun	MS	· Mounil	(Signature
August		, 2011	(Date

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/772,185	02/04/2004	Jude S. Sauer	LS-006CV	4686

TITLE OF INVENTION: INSTRUMENT FOR GUIDING THE SURGICAL CUTTING OF TISSUE AND METHOD OF USE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE								
nonprovisional	YES	\$755	\$0	\$0	\$755	08/26/2011								
EXAMINER ART UNIT		ART UNIT	CLASS-SUBCLASS	7 08/12/2011 HVUONG2	00000012 10772185									
NGUYEN, VI X		3731			5.00 OP 5.00 OP									
1. Change of correspond CFR 1.363).	lence address or indication	on of "Fee Address" (37	2. For printing on the p	• -	, Kennet	h J. LuKache								
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.											
								3. ASSIGNEE NAME A	AND RESIDENCE DAT	A TO BE PRINTED ON	THE PATENT (print or ty	pe)		
								PLEASE NOTE: Ur recordation as set for	nless an assignee is iden th in 37 CFR 3.11. Com	tified below, no assignee upletion of this form is NC	data will appear on the p or a substitute for filing an	patent. If an assignee is ic assignment.	dentified below, the doc	nument has been filed for
(A) NAME OF ASS				Y and STATE OR COUNT										
LSI SOL	UTIONS, INC	•	VICTOR, NI	EW YORK										
Please check the approp  4a. The following fee(s)		or categories (will not be p		Individual Corporati										
Issue Fee			A check is enclosed.											
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any											
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5. Change in Entity St	atus (from status indicate	ed above)			· · · · · · · · · · · · · · · · · · ·									
a. Applicant clair	ns SMALL ENTITY star	tus. See 37 CFR 1.27.	b. Applicant is no lor	nger claiming SMALL EN	FITY status. See 37 CFF	R 1.27(g)(2).								
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Authorized Signatur	72	-/	4	Date Augus		011								
Typed or printed par	ne Kenneth	J. LuKacher		Registration No.	38,539									

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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